## Interim Designation of Agent to Receive Notification of Claimed Infringement

Full Legal Name of Service Provider:
Alternative Name(s) of Service Provider (including all names under which the service
provider is doing business): Caseville Elementary School
Caseville Junior HIgh School
Caseville HIgh School
Address of Service Provider: 6609 Vine St., Box 1068, Caseville, MI 48725
Name of Agent Designated to Receive
Notification of Claimed Infringement: Cheryl Wascher
or similar designation is not acceptable except where it is the only address that can be used in the geographic location):  6609 Vine St., Box 1068  Caseville, MI 48725
Telephone Number of Designated Agent: 989-856-2311
Facsimile Number of Designated Agent: 989-856-8641
Email Address of Designated Agent:cwascher@qube.caseville.k12.mi.us
Signature of Officer or Representative of the Designating Service Provider:  Date:
Typed or Printed Name and Title: Dan Tighe, Superintendent

Note: This Interim Designation Must be Accompanied by a \$30 Filing Fee Made Payable to the Register of Copyrights.



